

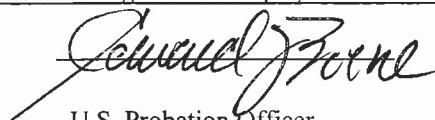
PAYMENT SCHEDULE FOR COURT-ORDERED MONETARY PENALTIES

Name: Kenneth Wilkerson
 Address: 2752 Beal Drive
Columbus, OH 45232

Docket No: 3:07CR0160
 Judge: Thomas M. Rose
 District: Southern District of Ohio

You have been ordered by the United States District Court to pay a special assessment of \$100.00, and \$10,727.00 in restitution and it was ordered as a condition of your supervised release.

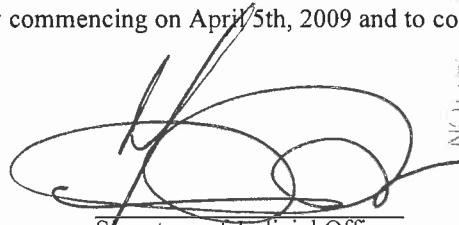
Probation Officer's Recommendation: It is the recommendation of the Probation Officer that the Court order a payment schedule in the amount of \$25.00 per month, commencing April 5, 2009. This is based on the following analysis of the defendant's ability to pay: Mr. Wilkerson has recently been placed on supervision and has paid his special assessment in full and paid \$217.09 toward his restitution. Mr. Wilkerson has agreed to pay \$ 25.00. in restitution per month. Mr. Wilkerson is currently working at Mitch's Complete Collison Center. He is Shop help at this time and is paid by the job. He is looking to secure employment in the near future. He is attending GED classes at Eastland Career Center.


 U.S. Probation Officer

3/23/09
 Date

THE COURT ORDERS:

a payment schedule of not less than \$25.00 monthly commencing on April 5th, 2009 and to continue until the debt is satisfied or the Court alters the payment schedule.

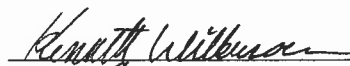

 Signature of Judicial Officer
3/27/09
 Date

Instructions to offender: Payments must be in the form of a Money Order, Certified Check or Cashier's Check. **Personal checks will not be accepted.** The check or money order must be made payable to: Clerk, U.S. District Court. Please reference the docket # listed above on the check or money order. Submit the payment directly to the Clerk of Courts at:

United States Clerk of Courts
 U. S. Courthouse, Room 260
 85 Marconi Boulevard
 Columbus, Ohio 43215

Note: Your restitution/fine bears or does not bear (strike one) interest. There could be additional monetary penalties for payments that come past due as outlined in the attached General Instructions Regarding Special Assessments, Restitution and Fines for Persons Under Supervision.

I agree to make payments as outlined above. I understand that failure to abide by this agreement could result in revocation of my supervision and other penalties. If for any reason I am unable to make a scheduled payment, I will contact my Probation Officer immediately to advise. I hereby acknowledge that I have received a copy of this schedule and agreement.


 Defendant

3/23/09
 Date


 U.S. Probation Officer

3/23/09
 Date

Original: prob file

Copies: defendant, US Attorney office, FLU